

Citywide Trail Inspection Form

Date: _____

Inspected By: _____

Trail Name	Nearest Cross Streets	Type	Comments
		<input type="checkbox"/> Open Space Trail <input type="checkbox"/> Circulation Element Trail	
Item	Condition	Location	Repairs Needed
Surface Condition Type _____	<input type="checkbox"/> Good <input type="checkbox"/> Poor		
Erosion	<input type="checkbox"/> Present <input type="checkbox"/> Not Present		
Edging Type _____	<input type="checkbox"/> Good <input type="checkbox"/> Poor		
Landscaping Pruning <input type="checkbox"/> Planting <input type="checkbox"/> Removals <input type="checkbox"/>			
Signage	<input type="checkbox"/> Good <input type="checkbox"/> Poor		
Fencing Type _____	<input type="checkbox"/> Good <input type="checkbox"/> Poor		
Drainage Swales	<input type="checkbox"/> Concrete <input type="checkbox"/> Earth/Stone		
Steps/Stairs/Perons Handrails	<input type="checkbox"/> Good <input type="checkbox"/> Poor		
Other: (Mark only if repairs are needed) Benches <input type="checkbox"/> Drinking Fountains <input type="checkbox"/> Trash Containers <input type="checkbox"/> Dog Waste Dispenser <input type="checkbox"/>			

For immediate trail maintenance items, please contact Park Maintenance at 434-2985 Such examples would include trees fallen over trails or drainage wash outs after a storm event.

Appendix 1